1404867

## FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated averag	ge burden			
hours per respon	se 16.00			

SEC USE ONLY				
Prefix		Serial		
		-		
D/	TÉ RECE	IVED		
	1	1		

JUN 2 0 200		SECTION 4(6), A M LIMITED OFFER		PTION	DATE RECEIVED
Name of Offering ( Cheeks)	hi: is an amendmen	t and name has changed, and in	dicate change.)		
Offer and Sale of Units of interdefiling Under (Check box(cs) that ap Type of Filing:    New Filing		So4 Rule 505 Rule 50	06 Section 4(6)	☐ ULOE	
		A. BASIC IDENTIFICAT	ION DATA		
I. Enter the information requeste	d about the issuer			·	07068678
Name of Issuer ( check if this	is an amendment an	nd name has changed, and indica	ate change.)		
Venture Investment Partners IV	/, LLC				
Address of Executive Offices		(Number and Street, City	, State, Zip Code)	Telephone Number	(Including Area Code)
60 Wells Avenue, Newton, MA		0111003	. 5 2: . 0.43	***	
Address of Principal Business Open (if different from Executive Offices		(Number and Street, City	y, State, Zip Code)	i cicpnone Numbe	r (Including Area Code)
Brief Description of Business			······································		n -000 d
To hold an interest in a limited	liability company	·.			PROCESSED
Type of Business Organization corporation business trust		partnership, already formed partnership, to be formed	other (p	lease specify); ly company	JUN 2 8 2007
Actual or Estimated Date of Incorporation or Org	ganization: (Enter t				THOMSON FINANCIAL
Federal: Who Must File: All issuers making a 77d(6).	m offering of securi	ties in reliance on an exemption	under Regulation Do	or Section 4(6), 17 CFR	230.501 et seq. or 15 U.S.C.
When To File: A notice must be fil and Exchange Commission (SEC) o which it is due, on the date it was n	n; the earlier of the o	date it is received by the SEC at	the address given be		
Where To File: U.S. Securities and	i Exchange Commis	sion, 450 Fifth Street, N.W., W	ashington, D.C. 205	549.	
Copies Required: Five (5) copies o photocopies of the manually signed			ich must be manuall	y signed. Any copies	not manually signed must be
Information Required: A new filing thereto, the information requested in not be filed with the SEC.					
Filing Fee: There is no federal filis	ng fee,				
State: This notice shall be used to indicat ULOE and that have adopted this are to be, or have been made. If a accompany this form. This notice this notice and must be completed	form. Issuers relying state requires the personal be filed in the	ng on ULOE must file a separa payment of a fee as a precondi te appropriate states in accorda	ate notice with the S ition to the claim for ance with state law.	ecurities Administrate the exemption, a fee	or in each state where sales in the proper amount shall
Callura to file notice in the		ATTENTION		comption Convers	aly failure to file the
Failure to file notice in the appropriate federal notice valing of a federal notice.					

		A. BASIC ID	ENTIFICATION DATA		
2. Enter the information r	equested for the fol	llowing:			
• Each promoter of	the issuer, if the is:	suer has been organized w	rithin the past five years;		
<ul> <li>Each beneficial ov</li> </ul>	ner having the pow	er to vote or dispose, or di	rect the vate or disposition	of, 10% or more of	f a class of equity securities of the issuer.
Each executive of	ficer and director o	f corporate issuers and of	corporate general and man	naging partners of	partnership issuers; and
<ul> <li>Each general and t</li> </ul>	managing partner o	f partnership issuers.			
Check Box(es) that Apply:	P amoter	Beneficial Owner	Executive Officer		General and/or Managing Partner
Full Name (Last name first, Tuch, Richard	if indivicual)		·	<del></del>	
Business or Residence Addre Venture Investment Part	•		,	<del></del>	
Check Box(es) that Apply;	Promoter	✓ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)	·		<del> </del>	· · · · · · · · · · · · · · · · · · ·
AK Partners, LLC					
Business or Residence Addre c/o Venture Mgm., 60 We	•	•	ode)		
Check Box(es) that Apply:	Fromater	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Linsey Enterprises LP	if indivi fual)				
Business or Residence Addre	ess (N imber and	Street, City, State, Zip Co	ode)		
c/o Venture Mgm., 60 We	ells Avenue, Nev	vton, MA 02459			
Check Box(es) that Apply:	l'romoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		<del>,</del>		
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	?romoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if indiv dual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)	······································	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Address	ess (Number and	Street, City, State, Zip C	ode)		
	(Use bla	ink sheet, or copy and use	additional copies of this s	heet, as necessary	)

墓		<b>世</b>			B. I	NFORMATI	ON ABOU	i Offeri	NG 🖔 🕏 a		Part of		
1. Has the ignues cold or does the ingues intend to call to non-according investors in this official.								Yes	No				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
2.								s N	/A				
	2. What is the thinking investment state with the described from any intervious.								Yes	No			
3.						le unit?						X	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such							he offering. with a state						
						on for that				ciated pers	ons of such		
Ful	l Name (l	Last name i	first, if inc	ividual)									
Bus	iness or	Residence	Address (i	lumber and	Street, C	ity, State, Z	ip Code)						
Man		sociated Br	alian an Di	.alau			<del></del>					·	
1481	ne or As	SOCIAICU DI	OKEI OI D;	:4101									
Star	es in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit l	Purchasers						<del></del>
	(Check	"All States	" or check	individual	States)		•••••			*************	***************************************	A)	l States
	[AL]	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID.
	CVT	IN SIE	IA	KS]	KY)	LA)	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH)	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
								التَّالِمَيْبَا					
Ful	l Name (	Last name i	first, if ind	ividual)									
Bus	iness or	Residence	Address (	Number an	d Street, C	ity, State, 2	Zip Code)					*****	<del> </del>
Nar	ne of Ass	sociated Br	oker or De	aler				<del></del> -	<del></del>	······································			
			<del></del>			0 11 11							
Sta						to Solicit						[] AI	1 States
	(Check	All States	or check	murviduai									1 219162
		AK	AZ	ĀR	CA	<u>[CO]</u>	CT (VC)	DE	DC)	FL	GA NOT	HI	
	IL I	IN NE	IA NV	KS NH	KY)	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	l Name (	Last name	first, if ind	ividual)		<del></del>				<u>.</u>			
<u> </u>		Davidanas	Add-see C	Nivenhau aa	d Stuant C	Siene Centa '	7:n Codo		<del></del>		·		
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nar	ne of Ass	sociated Br	oker or De	aler									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)							☐ AI	1 States					
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
	MT	IN NE	IA NV	(KS) (NH)	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS) OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA)	WA	WV	WI	WY	PR

## C: OFFIRING PRICE NUMBER OF INVESTORS; EXPENSES AND USE OF PROCEEDS:

Ι.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	s 0.00
	Equity		\$ 0.00
	Common Preferred	<u> </u>	
	Convertible Securities (including warrants)	s 0.00	\$ 0.00
	Partnership Interests		s 0.00
	Other (Specify units of LC interest		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	<b>J</b>	<u></u>
	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate delar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 10,000,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	The of Official	Type of	Dollar Amount Sold
	Type of Offering  Rule 505	Security	
		-	\$
	Regulation A		\$
	Rule 504		\$ \$ 0.00
	Total		3_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s0.00
	Printing and Engraving Costs		\$_0.00
	Legal Fees		\$ 40,000.00
	Accounting Fees		\$_0.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$_0.00
	Other Expenses (identify) Blue Sky Filing Fees	<b>Z</b>	<b>\$</b> 1,625.00
	Total		<b>\$</b> 41,625.00

C. OFFI RING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCEEDS 🚁	
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		9,958,375.00 \$
5. Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees	\$ 0.00	<u>0.00</u> \$_0.00
Purchase of real estate	\$_0.00	\$ 0.00
Purchase, rental or leasing and installation of machinery and equipment	\$_0.00	
Construction or leasing of plant buildings and facilities		\$ 0.00
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	s 0.00	<u>\$ 0.00</u>
Repayment of indebtedness		S 0.00
Working capital		<b>9,958,375.0</b> 0
	\$ 0.00	\$ 0.00
	s_0.00	ss
Column Totals		S 9,958,375.00
Total Payments Listed (column totals added)	Ø 8 <u>9</u> .	958,375.00
D FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commissi the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Ru Issuer (Print or Type)  Signature  Dz	on, upon writte le 502.	
Venture Investment Partners IV, LLC  Methand Test	6/13/0	7
Name of Signer (Print or Type)  Richard Tuch  Title of Signer (Print or Type)  President	<del>, , , ,</del>	

ENB

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)